PTO/SB/21 (11-07)
Approved for use through 11/30/2007. OMB 0651-0031
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

| Under the Paperw | ork Reduction Act of 1995, no pers | sons are required to res | pond to a collect | ion of informer | tion unless it displays a valid OMB control number | | |
|--|--|---|--|------------------------|--|--|--|
| | | Application Number | | 09/910,520-Conf. #2097 | | | |
| TRANSMITTAL FORM | | | Filing Date | | July 20, 2001 | | |
| | | | First Named Inventor | | Samuel Farchione | | |
| | | | Art Unit | | 3714 | | |
| (to be used for all correspondence after initial filing) | | | Examiner Na | ame | K. M Mosser | | |
| Total Numi | Total Number of Pages in This Submission 2/ | | | cket Numbe | FSP-10002/08 | | |
| | EN | ICLOSURES | (Check all | that appl | y) | | |
| Fee Tran | smittal Form | Drawing(s) | | | After Allowance Communication to TC | | |
| Fee Attached | | Licensing-related Papers | | | Appeal Communication to Board of Appeals and Interferences | | |
| X Amendment/Reply | | Petition | | | Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) | | |
| After Final | | Petition to Convert to a Provisional Application | | | Proprietary Information | | |
| Affidavits/declaration(s) | | Power of Attorney, Revocation Change of Correspondence Address | | Address | Status Letter | | |
| x Extension of Time Request | | Terminal Disclaimer | | | Other Enclosure(s) (please Identify below) | | |
| Express Abandonment Request | | Request for Refund | | | | | |
| Informati | on Disclosure Statement | CD. Number | of CD(s) | | | | |
| Certified Documer | Copy of Priority nt(s) | Landsc | ape Table on | CD | | | |
| | Missing Parts/ te Application | Remarks | | | | | |
| | ply to Missing Parts under CFR 1.52 or 1.53 | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | SIGNATU | IRE OF APPLICA | NT, ATTOR | NEY, OR | AGENT | | |
| Firm Name | GIFFORD, KRASS, | SPRINKLE, ANI | DERSON & | CITKOW | /SKI, P.C. | | |
| Signature | Julan | 1 | and the same of th | | | | |
| Printed name | Mark D. Schneider | | | | | | |
| Date November 29, 2007 | | | | Reg. No. | 43,906 | | |

| AME | Docket No. FSP-10002/08 | | | | | |
|-----------------------|---|---|-----------------------------------|------------------------|------------|-------------|
| Application | n No. | Filing | | Examiner | | Art Uni |
| 09/910,520-C | onf. #2097 | July 20, 2001 | | K. M. Mosse | er . | 3714 |
| olicant(s): Sar | nuel Farchione | | | | | |
| ention: METH | OD FOR DETE | RMINING PR | OPER COLO | R FOR MAKEUP A | ND CLOT | HING |
| | TC | THE COMMI | SSIONER FO | R PATENTS | | |
| ansmitted here | with is an ame | ndment in the | above-identifi | ed application | | |
| ne fee has beer | n calculated an | d is transmitte | d as shown be | elow. | | |
| | | | S AS AMENE | DED | , | |
| | Claims Remaining After Amendment | Highest Number Previously Pald | Number Extra Claims Present | Rate | | |
| Total Claims | 42 | - 43 = | | x | | |
| Independent Claims | 4 | - 4 = | | x | | |
| Multiple Depend | lent Claims (ch | eck if applicabl | e) | | | |
| Other fee (pleas | 525 00 | | | | | |
| TOTAL ADDIT | ONAL FEE FO | OR THIS AME | NDMENT: | | | 525.00 |
| Large Entity | | | | x Small Entity | | |
| No additiona | I fee is require | d for this amer | ndment. | | | |
| Please char | ge Deposit Acc | ount No. | 7-1180 in | the amount of \$ | | |
| | copy of this she | | | and amount or o | | |
| A check in th | ne amount of \$ | 525.00 | to cover t | the filing fee is encl | losed. | |
| | credit card. Fo | | | _ | | |
| The Director | ic horoby auth | orized to chan | ne and credit | Deposit Account N | 07 | -1180 |
| | below. A dup | | | | | |
| as acacinoc | | | | | | |
| | ny overpaymen | ıt. | | | | |
| x Credit a | | | n processing for | ees required under 3 | 37 CFR 1.1 | 6 and 1.17. |
| x Credit a | | | n processing f | ees required under 3 | 37 CFR 1-1 | 6 and 1.17. |
| x Credit a | any additional fili | ng or applicatio | n processing f | ees required under 3 | | |